

TENNESSEE GENERAL ASSEMBLY  
FISCAL REVIEW COMMITTEE



**CORRECTED  
FISCAL NOTE**

**HB 163 – SB 1202**

February 27, 2019

**SUMMARY OF BILL:** Removes the authority to order an autopsy from the County Medical Examiner. Authorizes the District Attorney General (DAG) to order an autopsy in certain circumstances. Authorizes the Chief Medical Examiner to order an autopsy if the DAG fails to act.

**ESTIMATED FISCAL IMPACT:**

On February 18, 2019, a fiscal note was issued for this legislation with the following estimated fiscal impact:

*Other Fiscal Impact – Removing the authority to order an autopsy from the County Medical Examiner could result in a shift of responsibility in funding regional forensic centers from local to state government; however, the extent and timing for any such shifts in responsibility cannot be reasonable determined.*

Due to new information received from the Department of Health, the estimated fiscal impact has been corrected as follows:

**(CORRECTED)**

**Increase State Revenue – \$1,700,000/Recurring/Department of Health**

**Increase State Expenditures – \$501,100/One-Time/General Fund**

**\$30,065,000/Recurring/General Fund**

**\$1,700,000/Recurring/District Attorneys**

**Decrease Local Revenue – \$2,200,000/Recurring**

**Decrease Local Expenditures – \$24,000,000/Recurring**

**Other Fiscal Impact** –To the extent county employed death investigator positions are reduced, there will be an additional decrease in local expenditures. The extent and timing of any such impact cannot be reasonable determined.

Corrected Assumptions:

- Pursuant to Tenn. Code Ann. § 38-7-106(a), the county medical examiner may order an autopsy of any person in a case involving a homicide, suspected homicide, a suicide, a violent, unnatural or suspicious death, an unexpected apparent natural death in an adult, sudden unexpected infant and child deaths, deaths believed to represent a threat to public health or safety, and executed prisoners. The DAG may order an autopsy in the absence of the county medical examiner or if the county medical examiner fails to act.
- When an autopsy is ordered, the autopsy is performed at one of the five regional forensic centers, located in Shelby, Davidson, Hamilton, Knox, and Washington Counties.
- Pursuant to Tenn. Code Ann § 38-7-105(a), these regional forensic centers are required to be accredited by the National Association of Medical Examiners (NAME).
- In order to maintain NAME accreditation, regional forensic centers are required to adhere to an inspection checklist to ensure minimum standards for autopsy performance, facilities, and death investigations.
- Additionally, a facility automatically loses accreditation if they fail to perform an autopsy on a minimum of 95 percent of cases in which the manner of death is unclear after the scene investigation is made, and autopsy a minimum of 90 percent of cases within 72 hours of referral. An autopsy is frequently delayed in states requiring the approval of the District Attorney prior to ordering an autopsy.
- Passage of the proposed legislation would remove the authority to order an autopsy from the County Medical Examiner.
- The proposed legislation would result in a shift of responsibility in funding these regional forensic centers from local to state government as many autopsies that are currently ordered by the County Medical Examiner, particularly those of no prosecutorial interest, would be ordered by the Chief Medical Examiner.
- These regional forensic centers are currently funded by the county they reside in. The total funding for all five regional forensic centers is \$24,000,000.
- The total decrease in local expenditures associated with counties no longer funding the regional forensic centers is estimated to be \$24,000,000.
- To the extent county employed death investigator positions are reduced, there will be an additional decrease in local expenditures. The extent and timing of any such impact cannot be reasonably determined.
- The recurring increase in state expenditures associated with the Department of Health (DOH) contracting with the five forensic centers is estimated to be \$24,000,000.
- The DOH currently reimburses the regional forensic centers for a portion of the costs associated with toxicology testing, autopsies, partial autopsies, anthropology and odontology, cases of sudden unexpected deaths in infants and children and reports for investigation. The average annual reimbursement to the forensic centers by the DOH is \$2,200,000.
- The recurring decrease in local revenue as a result of the DOH no longer reimbursing for the various services is estimated to be \$2,200,000.
- Based on information provided by the DOH, there were an estimated 5,019 autopsies performed in this state in 2017.
- The average cost of an autopsy is \$1,700.

- Passage of this legislation will require the office of the DAG to cover the cost of the autopsies ordered by their office. The DOH will be required to cover the cost of the autopsies ordered by the Chief Medical Examiner.
- The cost of the autopsies is included in the cost to operate the forensic centers.
- It is assumed the DAG will order 1,000 autopsies.
- The recurring increase in state revenue to reimburse the DOH for the cost of DAG autopsies is estimated to be \$1,700,000 (\$1,700 x 1,000 autopsies).
- Based on information provided by the DOH, the proposed legislation cannot be accommodated within existing resources. The DOH will require 54 Registered Nurse 3 positions to provide 24/7 death investigation coverage in each of nine regional health departments.
- The one-time increase in state expenditures associated with the additional Registered Nurse 3 positions is estimated to be \$232,200 [(\$1,600 computer cost + \$2,700 office furniture) x 54 positions].
- The recurring increase in state expenditures associated with the additional Registered Nurse 3 positions is estimated to be \$4,907,250 [(\$63,816 salary + \$17,159 benefits + \$7,900 administrative cost + \$1,400 communications + \$600 supplies) x 54 positions].
- Further, the DOH will require four Medicolegal Death Investigator positions; two Forensic Pathologist positions; two Administrative Services Assistant 3 positions; one Executive Administrative Assistant 3 position; and one Accountant 3 position to be housed in the central office to assist with the increased workload shifted to the DOH, proper death investigation and reporting, and assume the duties of the cremation permit approval process.
- The one-time increase in state expenditures associated with the 10 new positions is estimated to be \$43,000 [(\$1,600 computer cost + \$2,700 office furniture) x 10 positions].
- The recurring increase in state expenditures associated with the 10 new positions is estimated to be \$1,157,703 (\$851,664 salaries + \$207,039 benefits + \$79,000 administrative costs + \$14,000 communications + \$6,000 supplies).
- The DOH will require a vehicle at each of the nine regional health departments and the central office to assist with transporting; estimated to average \$22,590 per vehicle.
- The one-time increase in state expenditures associated with the initial purchase of 10 vehicles is estimated to be \$225,900 (\$22,590 x 10).
- The total one-time increase in state expenditures associated with this legislation is estimated to be \$501,100 (\$232,200 + \$43,000 + \$225,900).
- The total recurring increase in state expenditures to the Department of Health as a result of this legislation is estimated to be \$30,064,953 (\$24,000,000 + \$4,907,250 + \$1,157,703).

**CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.

A handwritten signature in black ink that reads "Krista Lee Carsner". The signature is written in a cursive, flowing style.

Krista Lee Carsner, Executive Director

/vlh